



**08/02/2018**

The commitments in this paper were drafted and subject to discussions with no. 10 and national partners

# **Delivering devolution commitments**

**Strategic Partnership Board**

**10 August 2017**



Public Health  
England



SUPPORTED BY  
**MAYOR OF LONDON**

# Effective delivery requires clear ‘homes’ and ‘owners’ for each devolution commitment

## A. Capital and Estates:

- *Governance:* London Estates Board
- *Accountable officers:* David Slegg and Geoff Alltimes
- *Delivery lead:* LEDU Director
- *Team:* London Estates Delivery Unit, located at the GLA
- *Partner leads:*
  - London Councils: Dick Sorabji
  - GLA: Amanda Coyle and Simon Powell
  - NHSE: David Slegg
  - NHSI: TBC
  - CCG: Peter Kohn

## Relevant devolution commitments:

- Establish the London Estates Board and support progression through the phases of operation
- Establish an London Estates Delivery Unit (LEDU) to consolidate and align regional and regionally-based national resource to augment local/NHS trust estate expertise, planning and delivery capability. Through the LEDU:
  - support local and STP areas with the preparation of high quality capital investment/disposal business cases
  - develop a London pipeline of prioritised schemes for development.
- Ensure capital receipts generated by NHS Trusts and Foundations Trusts within the London system can be retained within London for reinvestment in health and care.
- Ensure a collaborative approach to NHS Trust, FT, NHSPS and CHP investments and sales within London.
- Review and optimise incentives for surplus land disposal.
- Optimise NHS estate utilisation, including development of a London report on NHS estate utilisation.

## B. Prevention

- *Governance:* London Prevention Board
- *Accountable officer:* Yvonne Doyle
- *Delivery lead:* Jemma Gilbert
- *Team:* Blended HLP, NHSE, DPH and GLA team, located at the GLA/Marylebone Road/Skipton House
- *Partner leads:*
  - London Councils: Clive Grimshaw
  - DPH: Jeanelle DeGruchy
  - GLA: Amanda Coyle
  - NHSE: Matthew Bazeley
  - PHE: Yvonne Doyle
  - CCG: Jo Murfitt (Greenwich CCG)

### Relevant devolution commitments:

#### Tackling Obesity

- Strengthening the health related planning considerations in the London Plan [details in MoU].
- Exploring options to further restrict the advertising of unhealthy food and drinks in specific locations.
- Engagement with the Department of Education to develop guidance as revenue from the soft drinks industry levy is allocated to schools.

#### Creating Healthier Environments

- Exploring the evidence base for:
  - including health and wellbeing as a fifth licensing objective.
  - establishing a borough-led London-wide illegal tobacco and counterfeit alcohol enforcement team.
  - Granting local authorities the freedom to extend smoke-free areas to include alfresco dining areas of restaurants and pub gardens.
- Working with HMRC and DH to inform the government's reviews of sanctions to tackle illicit tobacco and individuals/businesses that break tobacco laws, and involving London in further consideration of the potential licensing of the tobacco supply chain.
- Working with DCMS in regards to the review of gaming machines and social responsibility measures.

#### Forging links between good health and employment

- Optimising the commissioning process and commission employment support to assist the very long-term unemployed and those with health conditions and disabilities to (re)-enter work.
- Devolving the Work & Health programme funding to London
- Exploring new models for integrating health and employment support and the role prevention and early intervention can play by:
  - Testing improvements to the Fit for Work support offer for people at risk of becoming long term employed.
  - Exploring options related to data sharing to facilitate a robust evaluation of the impact of enhanced local support for people experiencing mental health problems and who are at risk of falling out of work.

## C. Integration

- *Governance:* London Health & Care Strategic Partnership Board
- *Accountable officer:* Anne Rainsberry and Will Tuckley
- *Delivery lead:* Nabihah Sachedina
- *Team:* Blended HLP & London Councils team, located at the GLA/Marylebone Road/London Councils
- *Partner leads:*
  - London Councils: Will Tuckley
  - GLA: Amanda Coyle
  - NHSE: Anne Rainsberry
  - NHSI: Steve Russell
  - PHE: Yvonne Doyle
  - CQC: Nicola Wise
  - CCG: Andrew Eyres

### Relevant devolution commitments:

- London-wide health and care operational functions will be administered in shadow form through a London level Partnership Commissioning Board.
- Aligned regulatory approach through:
  - Joined up processes for NHSE and NHSI at regional level, including joint appointments for some key roles;
  - Closer working between NHSE, NHSI and CQC at London level, including alignment of regulatory actions and timelines where possible.
- Co-development of a regulation and oversight model that meets the needs of the London system, including the ability for an integrated delivery system to be regulated as a whole, and an approach that enables freedoms and flexibilities in the initial implementation stages.
- Devolution or delegation of NHS England functions to within the London system, including primary care commissioning and London's fair share of transformation funding.
- Supporting personalised, joined up care at all spatial levels. This involves developing a shared understanding of any current barriers to joint or lead commissioning arrangements.
- Co-developing and adopting innovative payment models at pace and scale.

## D. Workforce

- *Governance:* London Workforce Board
- *Accountable officer:* Aurea Jones/Matthew Kendall (TBC)
- *Delivery lead:* TBC
- *Team:* TBC
- *Partner leads:*
  - ADASS: Matthew Kendall
  - HEE: Aurea Jones
  - GLA: Amanda Coyle
  - NHSE: Oliver Shanley (TBC)

### Relevant devolution commitments:

- Establishing and developing a London Workforce Board, bringing together health and care partners and ensuring a collaborative strategic approach to London-wide issues
- Maximising the opportunities offered by the apprenticeship levy.
- Developing a London-wide workforce delivery system, including HEE, Skills for Health and Skills for Care
- Exploring a single employer framework, to re-distribute and better target the existing pay envelope.
- Exploring London weighting in the context of the current challenges in staff retention and turnover.

## E. Governance

- *Governance:* London Health Board (political) and London Health & Care Strategic Partnership Board (operational)
- *Accountable Officers:* Will Tuckley & Anne Rainsberry
- *Delivery lead:* Shaun Danielli and (for LHB) Amanda Coyle
- *Team:* HLP, located at the GLA/Marylebone Road
- *Partner leads:*
  - London Councils: Will Tuckley
  - London Councils: John O'Brien
  - NHSI: Steve Russell
  - GLA: Amanda Coyle
  - NHSE: Anne Rainsberry
  - PHE: Yvonne Doyle
  - CCG: Andrew Eyres & Marc Rowland

### Relevant devolution commitments:

- A re-cast London Health Board will enable political accountability of health and care in London, and provide political oversight of wider London transformation efforts.
- A London Health and Care Strategic Partnership Board will provide strategic and operational leadership and oversight for London-level activities, building on national direction (such as the Five Year Forward View) and London plans (including Better Health for London), but crucially emphasising the partnership approach and an agreed strategy for sustainability and transformation built up from local and sub-regional plans.
- A London strategic delivery group will support delivery, system transformation, and collaborative working at all spatial levels, and will build on the Healthy London Partnership.

## However, these commitments will need to be delivered as part of wider programmes of work

Existing health and care transformation programmes underway that have potential for greater collaboration/alignment

Devolution commitments

New health and care transformation priorities emerging from local areas; national policy etc.

Collaborative health and care programmes, co-developed by all partners

# Illustrative example: Health and Care Integration



This programme aims to support local areas in their health and care integration ambitions and, where desired, to develop into accountable care systems. Additional information is provided in the scoping paper 'Supporting health and care system integration in London'. Key links to be made to Care Closer to Home and iBCF.

## Key deliverables

<p>1 Case for change and narrative</p>	<ul style="list-style-type: none"> <li>A case for change supported by a strong analytics base grounded in the 'stories' of Londoners, that can be used to inform local decisions and debate on integration.</li> <li>A long term shared vision for health and care that sets out London's priorities for health and care over the next 10 years, building on Better Health for London.</li> <li>Core engagement and narrative materials for local adaptation: tailored to citizens, politicians, health and care workers, existing provider and commissioner organisations.</li> </ul>
<p>2 Options for integrated commissioning and delivery*</p>	<p>Clear and accessible description of different health and care delivery and commissioning models, targeted to local and multi-borough areas:</p> <ul style="list-style-type: none"> <li>Benefits, including evidence of health, service and financial outcomes</li> <li>Challenges of implementation</li> <li>Governance and accountability implications</li> <li>High-level process for establishing the model</li> <li>Illustrative case studies</li> </ul>
<p>3 The journey to greater integration</p>	<ul style="list-style-type: none"> <li>Essential ingredients for accountable care systems</li> <li>Clear description of the path to ACSs</li> <li>A support offer to enable system leadership and organisational development across health and care, at local, multi-borough and STP levels.</li> <li>A clear description of the path to new governance arrangements where locally desired, including assurance requirements and phasing</li> <li>Analytics and data: clear understanding of baseline, relevant metrics and approaches to assess potential impact and to inform outcome-based commissioning</li> <li>A shared approach to evaluation to allow spread/scaling</li> <li>Developing, piloting and adopting new payment models</li> </ul>
<p>4 An integrated approach to regulation</p>	<ul style="list-style-type: none"> <li>Alignment between regulators – developing joined up processes between NHSE, NHSI and CQC</li> <li>Develop and pilot an appropriate place-based framework for system regulation, in partnership with emerging health and care systems</li> </ul>
<p>5 A collaborative workforce</p>	<p>See next slide</p>
<p>6 Supporting local approaches</p>	<ul style="list-style-type: none"> <li>Developing local health and care systems: working with emerging health and care systems to implement and scale up local integration and utilise devolution levers including joint commissioning arrangements</li> <li>Enabling the rapid spread and sharing of learning across London.</li> </ul>
<p>* Delegated funding and commissioning</p>	<ul style="list-style-type: none"> <li>Supporting establishment of partnership commissioning board</li> <li>Assessing whether further delegation or devolution of commissioning is desirable</li> <li>Exploring delegation of specialised commissioning (readiness assessment) – TBC whether sits elsewhere</li> <li>Novel immunisation and screening commissioning and delivery arrangements -TBC whether sits elsewhere</li> <li>Supporting the delegation of transformation funding from April 2018</li> <li>Exploring any barriers to joint commissioning (legislative or otherwise)</li> </ul>

### Reports to

The SPB. May also report into the Partnership Commissioning Board where workstreams relate to integration of commissioning functions.

### Delivery, funding and resources

- Collaborative programme – key partners include NHSE, NHSI, CQC, London Councils, ADASS, STPs and emerging health and care systems
- Anticipated funding requirements are £650k – any further analytical or legal support required by local areas likely to be additional. Currently, 0.6 FTE Director (0.4 FTE devolution and wider collaboration) and 1 FTE 8c via HLP. Additional 1 FTE (TBC) from London Councils. Further required resourcing FY17/18: **anticipated to be 2 FTE + analytical support**

# Illustrative example: Health and Care Workforce - DRAFT



This programme aims to ensure a workforce that supports health and care integration and examines recruitment and retention challenges that could better be met through a collaborative approach.

A London Regional Workforce Hub delivered by HEE and supported by HLP will support STPs/LWABs and align with other ALBs in developing a single point of contact for workforce data in London.

## Key deliverables

<p><b>1 Strategic leadership</b></p>	<p>Support the set up of the London Workforce Board (LWB), including clear ToR. The LWB will:</p> <ul style="list-style-type: none"> <li>• Ensure there is early discussion at London level on emerging issues, and maintain a dialogue on policy and priorities, including workforce implications of service change/transformation.</li> <li>• Promote effective communications between partners and a collective approach to supporting and developing staff affected by service changes and transformation.</li> <li>• Provide oversight for London level delivery of devolution commitments and support pilots in their workforce transformation.</li> <li>• Ensure processes are in place for sharing learning amongst partner organisations and within the system more broadly.</li> <li>• Map the activities of member organisations to identify further opportunities for collaboration and more efficient working.</li> </ul> <p>Consider developing a forum for social care providers in London to enable better involvement and engagement.</p>
<p><b>2 Development and training</b></p>	<ul style="list-style-type: none"> <li>• Identify opportunities arising from the apprenticeship levy in London.</li> <li>• Develop a London-wide workforce delivery system, including HEE, Skills for Health and Skills for Care.</li> <li>• Identify opportunities for greater awareness of integrated and other sector roles during development and training e.g. social care placements during medical school; Ensuring Local Workforce Advisory Boards are aware of all the training programmes available from Skills for Care and Health, to develop local proposals for staff training together across health and social care.</li> </ul>
<p><b>3 Recruitment/retention</b></p>	<ul style="list-style-type: none"> <li>• Explore if there is a case for change to London weighting to enhance recruitment and retention: identify the potential economic impact and engage with trade unions.</li> <li>• Explore the impact of Brexit on London's health and care workforce to support discussions with national partners and central government.</li> <li>• Identify opportunities to attract young Londoners to careers in health and care.</li> <li>• Examine opportunities to develop STP or London-wide locum rates or opportunities for professional mobility through 'passporting'.</li> </ul>
<p><b>4 Integrated roles and working</b></p>	<ul style="list-style-type: none"> <li>• Clearly identify base case, stratified by STP (&amp; ACS) areas.</li> <li>• Examine different workforce requirements to support each delivery or commissioning model, through case studies</li> <li>• Project changes needed in the workforce to ensure that it is fit for purpose to meet London's changing needs.</li> <li>• Describe options for a more integrated workforce.</li> <li>• Develop team-based care models, including a plan for up/side-skilling existing workforce. Pilot with emerging health and care systems.</li> <li>• Describe and propose solutions to challenges facing health and care workforce integration such as: co-location, performance management, job evaluations, contractual issues, pay parity and career progression.</li> <li>• Develop a single employer framework, including provision for:             <ul style="list-style-type: none"> <li>• Unified job evaluation and performance management</li> <li>• Pay considerations and co-location between health and care</li> <li>• Employment freedoms for new combined roles</li> </ul> </li> </ul>

### Reports to

The London Workforce Board, then to the SPB.

### Delivery, funding and resources

- Collaborative programme – key partners include NHSE, NHSI, London Councils, ADASS, STPs, capital nurse, LWABs and emerging health and care systems
- **Anticipated funding requirements TBC**